

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003056

FILED  
Jun 06, 2008  
Secretary of State

**Entity Name:** THE RAYMOND AND Z. VALEERE SASS FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

7580 REGENCY LAKES DRIVE  
E 501  
BOCA RATON, FL 33433

**New Principal Place of Business:**

**Current Mailing Address:**

7580 REGENCY LAKES DRIVE  
E 501  
BOCA RATON, FL 33433

**New Mailing Address:**

11 STABLEMERE  
BALTIMORE, MD 21209

**FEI Number:** 65-1014883      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

SASS, Z V  
7580 REGENCY LAKES DR APT E5  
BOCA RATON, FL 334336969 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SASS, Z VALEERE  
Address: 7580 REGENCY LAKES DR E-501  
City-St-Zip: BOCA RATON, FL 33433

Title: VPD ( ) Delete  
Name: SASS, STEVEN M  
Address: 11 STABLEMERE CT  
City-St-Zip: BALTIMORE, MD 21209

Title: SD ( ) Delete  
Name: SASS, RONNEE MS  
Address: 2119 MALCOLM ROAD  
City-St-Zip: LOS ANGELES, CA 90025

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN SASS

MR

06/06/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date